



East Rockaway Recreation

17 John Street, East Rockaway, N.Y. 11518

516 341-0996

Mayor: Bruno F. Romano - Deputy Mayor: Gordon J. Fox

Trustees: Rich Bilello - Tim O'Hagan - Jack Felbinger

Program _____ FEE: _____

NAME: _____ Cell Phone Number _____

ADDRESS: _____ TOWN: _____ ZIP: _____

DATE OF BIRTH: _____ GRADE: _____ Age: _____ SEX: _____

EMAIL: _____

Guardian Name: _____

EMERGENCY CONTACT NAME: _____ RELATIONSHIP: _____

EMERGENCY CONTACT PHONE #: _____

Photo Release

Your participation in a Village of East Rockaway Recreation program or event provides consent to the Department to use photos and stories providing information about the Department and its programs and events to the public.

Parent Signature _____ Date: _____

I have read and signed the Waiver and Release

Parent Signature: _____ Date: _____

Refund Policy:

A full or partial refund will be issued for any program canceled by the East Rockaway Recreation department
Refunds due to illness or accident will be reviewed and must be submitted in writing and accompanied by a Doctor's Note.

Covid-19 Closures will be credited (no refunds)

Returned checks will incur a \$35.00 service charge. Cash or money order will be required immediately for redeposit.

MAIL-IN REGISTRATION AND PAYMENT (check only)

East Rockaway Recreation
376 Atlantic Avenue
East Rockaway, NY 11518
Or

Drop-off registration forms and payment (check only)

Use our **Locked box**

Located at the main doors of the
Recreation building

17 John Street, East Rockaway, NY 11518

Total Fee: _____

Date _____ Total _____ Check# _____ Receipt# _____



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Waiver and Release Covid-19

I, _____, the parent or legal guardian of _____ (participant), hereby covenant and agree to indemnify, release and hold harmless the: Incorporated Village of East Rockaway, all of the elected and appointed officers, directors, employees, volunteers, and/or agents, from and against any and all liability, loss, damages, claims, or actions (including costs and attorney fees) for any harm, bodily injury including economic, physical, or mental, including death, or property damage caused by the negligence of the Village or otherwise incurred by above named participant to the fullest extent permissible by law, arising out of his or her participation in ***East Rockaway Recreation*** registered program/s. I understand his/her participation in said program involves rigorous physical activity and risks of physical injury and I assume the risks.

I acknowledge that, in the middle of a global pandemic, there is a serious risk that, by using the facility, I or my children could contract a dangerous virus or other health condition, and that I accept this risk and nonetheless voluntarily choose to allow my children to use the facility.

In consideration of my children being allowed usage of any *Village of East Rockaway* property or facility during the COVID-19 pandemic and for other good and valuable consideration, receipt of which is hereby acknowledged, on behalf of myself, my children, and all others who may claim by, under, or through myself I do hereby agree to indemnify and hold harmless and do hereby release, acquit, and forever discharge the *Village of East Rockaway* and all of its officers, employees, agents and assigns, and all other persons or companies from any claims, actions, or causes of action which I or my children now have, or which may hereafter accrue, whether for personal injury or property damage, whether known or unknown, arising out of or in any way resulting from my and/or my children's usage of any Village of East Rockaway property or facility during the COVID-19 pandemic,

I hereby give consent for the transportation and treatment of the above named participant in the event of illness or injury. I hereby accept responsibility for the payment of any transportation or treatment costs. I further certify that the above-named participant is in good physical condition and has no medical or physical conditions that would restrict his/her participation in this program/event

I understand and agree that my signature below represents a signature on behalf of myself and each of my children.

Parent Name Printed: _____

Parent Signature: _____

Date of Signature _____

Name of my child: _____